PTO/SSUG (03-03)

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CLAIMS AS FILED - PART I (Column 1)  FOR NAMER FILED (Column 2)  SMALL ENTITY  RATE FEE  STORE REPORT NAMER FILED (Column 2)  SMALL ENTITY  RATE FEE  OR  X L	PATENT APPLICATION FEE DETERMINATION R.								ECORD		10630843		
CLAIMS AS FILED PART I  Column 1) (Column 2)  RATE FEE  RATE FEE  OR  RATE ADDITIONAL FEE  OR  OR  OR  OR  RATE ADDITIONAL FEE  OR  OR  OR  OR  RATE ADDITIONAL FEE  OR  OR  OR  RATE ADDITIONAL FEE  OR  OR  OR  OR  OR  OR  OR  OR  OR	Substitute for Point P10-013												
FOR NAMESER FILED NUMBER DOTTRA  RATE FEE  RATE FEE  OR  OR  OR  OR  OR  OR  OR  OR  OR							_	SMALL ENTITY		OR	SMALL ENTITY		
SASE FEE  DEST (19)  DEST (190)  DEST (190	an nation of the			MUMBER EXTRA			RATE	FEE		RATE	FEE		
TOTAL CAMES TOTAL CAMES TOTAL CAMES TOTAL  If the difference in column 1 is less than zero, enter "0" in column 2.  CLAIMS AS AMENDED - PART II  CCALUMN 3)  CCALUMN	FOR					I		8	OR		<u>:</u>		
GO CR. 118(c)  DOTRECOFT CLAIMS  DOTRECOFT CLAIMS  DOTRECOFT CLAIMS  PROBLEM 3 -	(37 CFR 1.18(a))				Ī	x 4c		OR	x •				
MAI TPLE DEPENDENT CLAMP RESENT (37 CPR 1.98(d))  "I the difference in column 1 is less than zero, erder "V" in column 2.  CLAIMS AS AMENDED - PART II  CLAIMS (Column 1)  (Column 2)  (Column 2)  (Column 3)  REMANING PRESENT PRESENT PRESENT PRESENT PRESENT PRESENT PRESENT PRESENT PRESENTATION OF MAITIFE DEPENDENT CLAM (37 CPR 1.18(d))  Total  (Column 1)  (Column 2)  (Column 3)  (Column 3)							ı	×		OR	x		
### TOTAL OR TOTAL  If the difference in column 1 is less than zero, enter 'O' in column 2.  CLAIMS AS AMENDED — PART II  CLAIMS — REALANNO — RESENT PRESENT PRESENT PRESENT PREVIOUSLY PAID FOR AMENDED — PREVIOUSLY PAID FOR AMENDED — PAID FOR AMENDED — PREVIOUSLY PAID FOR AMENDED — PREVIOUSLY PAID FOR AMENDED — PAI						Ì			OR.	+1 .			
CLAIMS AS AMENDED - PART II  CLAIMS   Column 1)   Column 2)   Column 3)   SMALL ENTITY   CR   SMALL ENTITY    RATE   ADDITIONAL FEE   CR   CR   CR   CR   CR   CR   CR	MULTIPLE DEPENDENT CLAIM PRESENT (37 GFR 1.18(4))						ı			1			
CLAIMS AS AMENDED - PART II    Column 1)	. 0 94	og ni somnello	lumn 1 is less that	n zero, enti	er To in column 2	TOTAL		ı ok	101AL	·			
COLUMN 1 (COLUMN 2) (COLUMN 3) SMALL ENTITY  CLAIMS   HIGHEST   PRESENT   RATE   ADDITIONAL   FEE    TOTAL   ADDITIONAL   FEE   ADDITIONAL   FEE    TOTAL   ADDITIONAL   FEE   ADDITIONAL   FEE    TOTAL   ADDITIONAL   FEE    TOT	CHANG AS AMENDED - PART II												
Column 1)   Column 2)   Column 3)   RATE   ADDITIONAL   FEE	4							SMALL	NTITY	OR			
REMAINING PREVIOUSLY PAID FOR CORMIN 3 Milms " 4D "	X	45/BZ			HIGHEST					1	RATE		
Total at OPN.15(a) 3 Minus " 4		'	REMAINING		PREVIOUSLY			KAIE	TIONAL				
(Column 1) (Column 2) (Column 3)  (Column 3) (Column 3) (Column 3)  (Column 3) (Column 3)  (Column 3) (Column 3)  (Column 3) (Column 3)  (Column 3) (Column 3)  (Column 4) (Column 3)  (Column 4) (Column 4)  (Column 5) (Column 4)  (Column 6) (Column 6)  (Column 7) (Column 7)  (Column 7) (Column 7) (Column 7) (Column 7)  (Column 7) (Column 7) (Column 7) (Column 7)  (Column 7) (Colum	퇿			Minst	PAID FOR	•				1	X I		
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(Column 1) (Column 2) (Column 3)  CLADIAS REMAINING AFTER NUMBER PREVIOUSLY EXTRA PREVIOUSLY PRESENT TOTAL ADDYL FEE OR ADD	Į₹	FIRST PRESENT	ATION OF MALTIPU	DEPENDE	NT CLASS (87 CF	R 1.16(4)	•			-	TOTAL	242	
CLAMAS REMARKING AFTER PREVIOUSLY PAID FOR LADOL FEE OR L										OR.	ADD'L FEE	001)	
CLAIMS REMAINING RATE ADDI-FEE  RATE ADDI-FEE  RATE ADDI-FEE  OR  X \$	1		Ø 1)		(Column 2)				-				
Column 1   Column 2   Column 2   Column 2   Column 2   Column 2   Column 3			CLADAS		HIGHEST	PRESENT	1	RATE			RATE		
TOTAL ADDITION OF MALTIPLE DEPENDENT CLAIM (37 CFR 1.18(4))  TOTAL ADDITIFE  (Column 1)  (Column 2)  (Column 3)  (Column 3)  RATE ADDITIONAL FEE  OR  X 8  OR  X 8		1/10x	AFTER		PREVIOUSLY	EXTRA	l			] ·			
TOTAL ADDITION OF MALTIPLE DEPENDENT CLAIM (37 CFR 1.18(4))  TOTAL ADDITIFE  (Column 1)  (Column 2)  (Column 3)  (Column 3)  RATE ADDITIONAL FEE  OR  X 8  OR  X 8	N N	Total		Minus		•	1	x		_ oa	x \$		
TOTAL ADDITION OF MALTIPLE DEPENDENT CLAIM (37 CFR 1.18(4))  TOTAL ADDITIFE  (Column 1)  (Column 2)  (Column 3)  (Column 3)  RATE ADDITIONAL FEE  OR  X 8  OR  X 8	ğ	Independent	• 11	Minus	*** LJ	•	1	X		OR	1×5		
(Column 1) (Column 2) (Column 2)  CLAIMS HIGHEST PRESENT NUMBER PREVIOUSLY PRESENT EXTRA PAID FOR PREVIOUSLY PAID FOR LIFEE  Total provincing (27 CFR 1.1800) " (1 Minus " (1 " " " " " " " " " " " " " " " " "	Ä		<del>-7</del>	لـــــا		T + 4040)	1	40 0		OR	11		
(Column 1) (Column 2) (Column 3)  CLABAS HIGHEST PRESENT ADDITIONAL FEE ADDITIONA	TRIST PRESENTATION OF MALTIPLE DEPENDENT CLASS GI CHR LINGUI						j	TOTAL	1	٦ ,			
CLAIMS HIGHEST PRESENT ADDITIONAL FEE ADDITIONAL FE	ADD'L FEE CR ADD'L'SE												
REMAINING AFTER PREVIOUSLY PAIRON FEE TOWN FEE OR X S OR X		• -	(Column 1)			(Column 3)	7		1	7			
AFTER AMENDMENT PRIEVOUSLY PAID FOR X 8 OR X	0				NUMBER			RATE			RATE	TIONAL	
* 8 the entry in column 1 is less than the entry in column 2, with "O' in column 3.  * 8 the entry in column 1 is less than the entry in column 2, with "O' in column 3.  * 8 the entry in column 1 is less than the entry in column 2.			AFTER AMENDMENT				4			-	-	- FEE	
* 8 the entry in column 1 is less than the entry in column 2, with "O' in column 3.  * 8 the entry in column 1 is less than the entry in column 2, with "O' in column 3.  * 8 the entry in column 1 is less than the entry in column 2.	ME			Minus	* 40	<u> </u>	1	× 5		→ OR	×s +-	<del> </del>	
* 8 the entry in column 1 is less than the entry in column 2, with "O' in column 3.  * 8 the entry in column 1 is less than the entry in column 2, with "O' in column 3.  * 8 the entry in column 1 is less than the entry in column 2.	S	Independent	. 4	Minus	" 4	1		X	<del></del>	OR	ו	1	
* 8 the entry in column 1 is less than the entry in column 2, write "o" in column 3.  * 8 the entry in column 1 is less than the entry in column 2, write "o" in column 3.  * 8 the entry in column 1 is less than the entry in column 2, write "o" in column 3.	N.							+1 -		OR	1	<del> </del>	
* 8 the entry in column 1 is less than the entry in column 2, write "0" in column 3.  * 8 the entry in column 1 is less than the entry in column 2, write "0" in column 3.	1	FORT PRESER					_			CR			
MANAGEMENT STREET STREE		• If the order in	column 1 is less 0	nen Uno ent	ry in column 2. w	to " in colum	n 3						
"If the "Highest Number Previously Paid For I'll HIS STACE g the highest number found in the exprepriets box in column 1.	"If the "Righest Number Previously Paid For" IN THIS SPACE is less than 1, enter "3".  "If the "Righest Number Previously Paid For" IN THIS SPACE is less than 1, enter "3".  "If the "Righest Number Previously Paid For" IN THIS SPACE is less than 1, enter "3".  "If the "Righest Number Previously Paid For" IT out or independent) is the highest number found in the appropriate box in column 1.												

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 1, enter T.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.18. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confideratelly is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 crimities to complete, USPTO to process) an application. Confideratelly is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 crimities to complete, USPTO to process) an application. Confideratelly is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 crimities of comments because the USPTO. Time will vary depending upon the inchividual case. Any comments because of a state of the you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Palarin on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Palarin on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Palarin and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS and Trademark Office.